

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Edward L. "Bud" Conley - Trustee - G.G.I.D.

Name (print)

P.O. Box 7

Office (if applicable)

Gerlach 89412

District (if applicable)

557-2322

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL. PRY ☐ IND. EXP ☐ AMENDED ☐ ANNUAL FILING

☐ Annual Filing - Due January 15, 2004

Period: January 1, 2003 - December 31, 2003

☐ Report #1 - Due August 31, 2004

Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug. 26, 2004
Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug. 26, 2004
All others Period: Jan. 1, 2004 - Aug. 26, 2004
Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug. 26, 2004

☒ Report #2 Due - October 26, 2004

Period: Aug. 27, 2004 - Oct. 21, 2004

☐ Report #3 Due - January 15, 2005*

Period: Oct. 22, 2004 - Dec. 31, 2004
BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

FILED #

OCT 18 2004

IN THE OFFICE OF

DEAN HELMER, SECRETARY OF STATE
FOR OFFICE USE ONLY

838

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100

2. Total Monetary Contributions Received of \$100 or Less

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

3. Total Amount of Monetary Contributions Received

(Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid

(Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Edward L. Conley

Date

Oct 10 - 2004

an

Report Period

District (if applicable)

PAGE 2 OF 2

CAMPAIGN EXPENSES

Report Period #

Name (print) Edward L. "Bob" Conley trustee

Office (if applicable)

GG-10

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses <u>0</u>	A
Expenses related to volunteers <u>0</u>	B
Expenses related to travel <u>0</u>	C
Expenses related to advertising <u>0</u>	D
Expenses related to paid staff <u>0</u>	E
Expenses related to consultants <u>0</u>	F
Expenses related to polling <u>0</u>	G
Expenses related to special events <u>0</u>	H
** Goods and services provided in kind for which money would otherwise have been paid <u>0</u>	I
Other miscellaneous expenses <u>0</u>	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Report Period

District (if applicable)

NAME AND ADDRESS OF
PERSON, GROUP OR
ORGANIZATION WHO RECEIVED
THE PAYMENT FOR THE
EXPENSE(S)

CATEGORY
(See Previous Page)
NRS 294A.365

DATE OF EACH
EXPENSE

AMOUNT OF
EACH EXPENSE

Report Period

3

Name (print)

Office (if applicable)

District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary**

This page may be copied or duplicated if additional space is needed.

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District (if applicable)